

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HS		1-21-00
O.I.P.E. CLASSIFIER		5	2-8-00
FORMALITY REVIEW	70	6098	2-1-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/2/02
2			3/6/03
3			4/8/03
4			12/4/03
5			3/22/04
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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